

<b>Issue Classification</b>			<b>Application No.</b>	<b>Applicant(s)</b>	
			09/784,649	ISLAM, MOHAMMED N.	
			<b>Examiner</b>	<b>Art Unit</b>	
			Mike Stahl	2874	

ORIGINAL			CROSS REFERENCE(S)					
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
385	24	385	27	122				
INTERNATIONAL CLASSIFICATION								
G	o	2	B	6126				
				/				
				/				
				/				
				/				
Mike Stahl 1/9/04 (Assistant Examiner) (Date)			John D. Lee John D. Lee Prin Primary Examiner			Total Claims Allowed: 221 01/27/04 (Date)		
Richards 1/13/04 (Legal Instruments Examiner) (Date)						O.G. Print Claim(s) 1	O.G. Print Fig. 17	

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	1	31	31	60	61	90	91
2	2	32	32	61	62	91	92
3	3	33	33	62	63	92	93
4	4	34	34	63	64	93	94
5	5	35	35	64	65	94	95
6	6	36	36	65	66	95	96
7	7	37	37	66	67	96	97
8	8	38	38	67	68	97	98
9	9	39	39	68	69	98	99
10	10	40	40	69	70	99	100
11	11	41	41	70	71	100	101
12	12	42	42	71	72	101	102
13	13	43	43	72	73	102	103
14	14	44	44	73	74	103	104
15	15	45	45	74	75	104	105
16	16	46	46	75	76	105	106
17	17	47	47	76	77	106	107
18	18	48	48	77	78	107	108
19	19	49	49	78	79	108	109
20	20	50	50	79	80	109	110
21	21	51	51	80	81	110	111
22	22	52	52	81	82	111	112
23	23	53	53	82	83	112	113
24	24	54	54	83	84	113	114
25	25	55	55	84	85	114	115
26	26	56	56	85	86	115	116
27	27	57	57	86	87	116	117
28	28	58	58	87	88	117	118
29	29	59	59	88	89	118	119
30	30	60	60	89	90	119	120

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CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)									
INTERNATIONAL CLASSIFICATION												
		/										
		/										
		/										
		/										
		/										
(Assistant Examiner) (Date)			(Primary Examiner) (Date)								Total Claims Allowed:	
(Legal Instruments Examiner) (Date)											O.G. Print Claim(s)	O.G. Print Fig.

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
209	211		241		271		301
210	212		242		272		302
211	213		243		273		303
214			244		274		304
212	215		245		275		305
213	216		246		276		306
214	217		247		277		307
215	218		248		278		308
216	219		249		279		309
217	220		250		280		310
218	221		251		281		311
219	222		252		282		312
220	223		253		283		313
221	224		254		284		314
225			255		285		315
226			256		286		316
227			257		287		317
228			258		288		318
229			259		289		319
230			260		290		320
231			261		291		321
232			262		292		322
233			263		293		323
234			264		294		324
235			265		295		325
236			266		296		326
237			267		297		327
238			268		298		328
239			269		299		329
240			270		300		330